

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2008</h3>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/528,052-Conf. #6379
		Filing Date	November 1, 2005
		First Named Inventor	Nobutoshi ARAI
		Examiner Name	J. M. Valentine
		Art Unit	2815
TOTAL AMOUNT OF PAYMENT		(\$) 810.00	Attorney Docket No. 0020-5354PUS1

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

Total Claims <u>41</u> - 41 = <u>0</u> x <u> </u> = <u> </u> HP = highest number of total claims paid for, if greater than 20.	Extra Claims <u> </u> x <u> </u> = <u> </u> Fee (\$) <u> </u> Fee Paid (\$) <u> </u>	Multiple Dependent Claims Fee (\$) <u> </u> Fee Paid (\$) <u> </u>
Indep. Claims <u>3</u> - 3 = <u>0</u> x <u> </u> = <u> </u> HP = highest number of independent claims paid for, if greater than 3.	Extra Claims <u> </u> x <u> </u> = <u> </u> Fee (\$) <u> </u> Fee Paid (\$) <u> </u>	

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets <u> </u> - 100 = <u> </u> /50 = <u> </u> (round up to a whole number) x <u> </u> = <u> </u> Extra Sheets <u> </u> x <u> </u> = <u> </u> Number of each additional 50 or fraction thereof <u> </u> Fee (\$) <u> </u> Fee Paid (\$) <u> </u>

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)	
Other (c.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...	810.00
Fees Paid (\$)	

SUBMITTED BY

Signature	<u>Robert Dunn # 48222</u>	Registration No. (Attorney/Agent)	39,491	Telephone	(703) 205-8000
Name (Print/Type)	Michael R. Cammarata	Date	July 10, 2008		